			CES OTHER THAN PERS  Use continuation sheet(s) if necessar		BU. VO	.u, NO	DAID BY
S	•					1	PAID BY
		(Departme	nent, bureau, or establishment)				
oucher pres	pared at		(Give place and date)				
ayee's Acce			Discount Terms				
0		ton, Germash	nausen & Grier, Inc.			1	
	(Payee)						
	(Address)				***		
		<b>D</b> •	Req. No.	Date		Invoic	ce Rec'd.
ontract No.	TE 2191	Date	Req. No. Weight		Govt. B/L	••••	
hipped from	antich (q. 165) - Carlos	1.00	ARTICLES OR SERVICES		UNIT	PRICE	AMOUNT
No. and Date o Order	of Date of Delivery or Service	(Enter description, schedule, and	item number of contract or Federal s other information deemed necessary	y) Quantity	Cost	Per	•
		Invo	oice No.				\$ 2,755.22
		87	(Orig. Inv. Att)				\$ 2,755.22
		88					31,506.00
		89	(Orig. Inv. Att) (Orig, Inv. Att)				3,150.60
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					1		\$65,903.08
			(PAYEE MUST NOT USE THIS	SPACE	TOTAL		ψυ, γυ3.00
PAYMENT:			UNIEE MUST NUT USE THIS	DIFFERENCE	S		
r				DIFFERENCE			
COMPLETE PARTIAL	<u> </u>						-
FINAL	Image: section of the content of the						\$ 6590308
TPROGRESS				Amount ve			1 63 90 3 08
ADVANCE				(Signature			Ty that
ADVANCE	,			nt to authority v	ested in n	r follow	yment.
	or	=\$	······	correct	000		ymeni.
T Approved for						-	(Date)
T Approved for						1	
TApproved for the Approved for the Appro						F-	ontracting Offi
TApproved for the Approved for the Appro	te	=\$1.00	EXECUTED WHEN PURCHASES AR TION (Appropriation Symbol must			Y	FORM

#### Sanitized Copy Approved for Release 2010/06/08: CIA-RDP65-00523R000100180004-9 VOUCHER FOR PURCHASES AND D.O. VOU. NO. PUB 7 GAO 5030 1034-107 ICES OTHER THAN PERSONAL BU. VOU. NO.\_ Use continuation sheet(s) if necessary PAID BY Contracting Officer (Department, bureau, or establishment) Voucher prepared at \_\_\_\_\_ (Give place and date) Payee's Account No. \_\_\_\_\_ Discount Terms Edgerton, Germeshausen & Grier, Inc. Date 4/26/57 Contract No. TE 2191 Invoice Rec'd. Date Reg. No. Govt. B/L No. Weight Shipped from ARTICLES OR SERVICES AMOUNT UNIT PRICE Enter description, item number of contract or federal supply schedule, and other information deemed necessary) Quantity No. and Date of Date of Deliver Order or Service \$2,755.22 Fixed Fee July 1960 TOTAL (PAYEE MUST NOT USE THIS SPACE) PAYMENT: DIFFERENCES. COMPLETE PARTIAL FINAL Amount verified; correct for. **PROGRESS** (Signature or initials)\_ ADVANCE Pursuant to authority vested in me, I certify that this voucher is correct and proper for payment. † Approved for \_ By. (Authorized Certifying Officer) Title \_ =\$1.00Exchange rate\_ THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional) on Treasurer of the United States Check No. \_\_\_\_ Check No. \_\_ Paid by Payee \* When used in foreign countries, insert name of currency of country in which used.

Sanitized Copy Approved for Release 2010/06/08 : CIA-RDP65-00523R000100180004-9

Title\_

† If the ability to certify and authority to approve are combined in one person, one signature only is nec-

essary; otherwise the approving officer will sign on the line below "Approved for \$\_\_\_\_

over his official title.

Sanitized Copy Approved for Release 2010/06/08: CIA-RDP65-00523R000100180004-9

Saniti Standard Form No. 1435 1035-104

# Pul Voucher for Purchases and Services Other Than Personal

o. and Date	Date of Delivery	ARTICLES OR SERVICES	OUAN-	UNIT	PRICE	AMOUNT	г
o. and Date of Order	Delivery or Service	(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	QUAN- TITY	Cost	Per		
		Costs- July 1960				\$27,552.	-
ļu		Fixed Fee (10% of above)				2,755.	
1		Fixed Fee Previously Billed				-0-	
		Amount of this Voucher				\$ 2,755.	;
	and	rtify that the Fixed Fee claimed is correctinat it is proportionate to the progress mact."	t and ade on	just; the			
		EDGERTON, GERMESHAUSEN & GRIER, INC.					
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		SERVICES OTHER THA		AND			0.0
		Use continuation sheet			BU. VO	OU. NO	88
	Contractin	or Officer					PAID BY
, <b>3.</b>	COHUTACULI	(Department, bureau, or establishment)				-	melter-
oucher prep	ared at	(Give place and do	30 Sept	ember 1	960	122	8432.11
						. 0	1000
ayee's Acco	unt No	Discount Term	s		-	•	
0	Edgerton, (Payee)	Germeshausen & Grier, Inc	•				
	(Address)						
ontract No. <sup>TE</sup> hipped from	2191	Date $4/26/57$ Req. No.		Date (	Govt. B/L		e Rec'd.
lo. and Date of	Date of Delivery	ARTICLES OR SERVICES (Enter description, item number of contract	or federal suppl	y Quantity		PRICE	TANOMA
Order	or Service	schedule, and other information deems	d necessary)		Cost	Per	•
		Fixed Fee August 1960					\$2,633.92
AYMENT:		(PAYEE MUST NOT	1	CE)	TOTAL		A26339,
COMPLETE	]						
PARTIAL FINAL	]   ]						1.
PROGRESS	j			Amount ver	ified; con	ect for	R 2 633.92
ADVANCE	] [			(Signature d	or initials		
		=\$	Pursuant to a this voucher	is correct a	nd prope	for pay	ment.
-			†(Author	ized Certifying (	Officer)		(Date)
xchange rate_							
		OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MAING CLASSIFICATION (Appropriation Sym					
		ING CLASSIFICATION (Appropriation Sym	npol must be sh	own; other	classifica	non optic	onal)

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Character for Purchases and

## Services Other Than Personal

		ARTICLES OR SERVICES	OHAN	UNIT	PRICE	AMOUNT
and Date Order	Date of Delivery or Service	(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	QUAN- TITY	Cost	Per	
		Costs-August 1960 Fixed Fee (10% above) Fixed Fee Previously Billed Amount of this Voucher				\$26,339.24 2,633.92 -0- \$ 2,633.92
	and t	ertify that the Fixed Fee claimed is that it is proportionate to the progresct."  EDGERTON, GERMESHAUSEN & GRIER, I	ess ma	t and de on	just; the	
		plle	<u>r</u>			STAT
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#### PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

D. O.	VOU.	NO		

Use continuation sheet(s) if necessary

BU. VOU. NO. 89

J. S	Contracti	ng Officer (Department)	t, bureau, or establishment)				-	PAID BY
Voucher prep	pared at	(0.050		10 Nov	ember :	L960		Inch #3 8-8433-60
Payee's Acco	ount No		_ Discount Terms					77-0735-60
то	Edgerton, (Payee)	Germeshausen	& Grier, Inc.	·	-			, _
***************************************	(Address)							
Contract No. <sup>TE</sup> Shipped from	-2191	Date 4/26,	/57 Req. No. Weight		Date	Govt. B/L		e Rec'd.
No. and Date of Order	Date of Deliver	Y (Enter description, item	TICLES OR SERVICES  n number of contract or er information deemed		Quantity	UNIT	PRICE	AMOUNT
			_	11444334177				
		Month of Ser	ptember 1960					
		Materials &	Services					\$ 8,880.50
	-	Direct Labor						11,115.34
		Travel Exper	nse					663.33
		Burden						8,245.42
		G & A						
								2,601.41 \$31,506.00
								1000
								./
	<u> </u>					TOTAL		\$31,506.00
AYMENT:			(PAYEE MUST NOT US	SE THIS SPACE	E)			
				DI	FFERENCES .			
COMPLETE				_				ļ
PARTIAL				_				-
FINAL		A.		_				1
PROGRESS				A	mount veri	fied; corre	ect for	\$ 31,506.00
ADVANCE				(S	ignature o	r initials)_		
				Pursuant to au	thority ves	red in me	, I certiny	mun
Approved for _		=\$		his voucher is			_	
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			····	(Authorize	d Certifying O	fficer)		(Date)
xchange rate		=\$1.00						STAT
	THE REVERS	OF THIS FORM MUST BE EXECUT	ED WHEN PURCHASES ARE MADE OF	SERVICES SECURED	WITHOUT WRIT	EN AGREEMEN	T IN ANY FOR	RM
	ACCOUNT	ING CLASSIFICATION	(Appropriation Symbo	must be show	vn; other c	lassification	on option	nal)
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aid by	neck No			_ on		(No	me of Bank)	
1 -	¢			10 0				
	Cash, \$			Pay	ee			
		rt name of currency of country	y in which used. one person, one signature or	h. is and Per				
sary; otherwise the o	approving officer wil	I sign on the line below "App	one person, one signature or proved for \$	'', and				
ver his official title.				Title				

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### Services Other Than Personal

	Date of	ARTICLES OR SERVICES	OWAN	UNIT	PRICE	AMOUNT
lo. and Date of Order	Delivery or Service	(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	QUAN- TITY	Cost	Per	
		Materials & Services \$8,880.50 Direct Labor 11,115.34 Travel Expense 663.33 *Burden 8,245.42 Total Direct Costs G & A				\$28,904.59 2,601.41
		*Burden: September Non Premium Dire 80% of \$10,306.77-\$8,245.42	ct Lab	or		\$31,506.00
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Sanitized Copy Approved for Release 2010/06/08: CIA-RDP65-00523R000100180004-9 Standar orm No. 1034 7 GAO 5030 VOUCHER FOR PURCHASES AND D. O. YOU. NO. .... PUB 1034-107 SERVICES OTHER THAN PERSONAL BU. YOU. NO.\_ Use continuation sheet(s) if necessary Contracting Officer (Department, bureau, or establishment) 10 November 1960 Voucher prepared at \_ (Give place and date) Payee's Account No. \_\_\_\_\_ Discount Terms \_ Edgerton, Germeshausen & Grier, Inc. (Address) Date 4/26/57 Contract No. TE-2191 Invoice Rec'd. Req. No. Date Govt. B/L No. Weight Shipped from ARTICLES OR SERVICES UNIT PRICE **AMOUNT** Date of Delivery (Enter description, item number of contract or Federal supply or Service schedule, and other information deemed necessary) No. and Date of Quantity Cost Per \$3,150.60 Fixed Fee September 1960 TOTAL (PAYEE MUST NOT USE THIS SPACE) PAYMENT: DIFFERENCES \_ COMPLETE FINAL Amount verified; correct for. **PROGRESS** (Signature or initials). ADVANCE Pursuant to authority vested in me, I cermy man this voucher is correct and proper for payment. † Approved for \_ Ву \_\_ (Authorized Certifying Officer) (Date) Title \_  $_{--} = $1.00$ Exchange rate\_ STAT THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional) on Treasurer of the United States Check No. ..... Check No. \_\_\_ Paid by (Name of Bank) \* When used in foreign countries, insert name of currency of country in which used. t If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign on the line below "Approved for \$\_\_\_ Title\_

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over his official title.

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blic Voucher for Purchases and Services Other Than Personal

and Date f Order	Date of Delivery	ARTICLES OR SERVICES		OUAN	UNIT	PRICE	AMOUNT
	or Service	(Enter description, item number of contract or Federal schedule, and other information deemed necessar	supply y)	QUAN- TITY	Cost	Per	
		Costs-September 1960					423 506 00
		Fixed Fee (10% of above)	- 1				\$31,506.00 3,150.60
		Fixed Fee Previously Billed					-0-
		Amount of this Voucher					\$ 3,150.60
	"I certi	fy that the Fixed Fee claimed is		naat d	~ 4 4		
	CHILL OTTER	to is proportionate to the prog	ress n	nade d	n the	8 6 3	i
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#### Sanitized Copy Approved for Release 2010/06/08 : CIA-RDP65-00523R000100180004-9 Standard Form No. 1034 PUCC VOUCHER FOR PURCHASES AND D. O. VOII NO. 1034-107 C VOUCHER FOR PURCHASES AND

D. O. VOU. NO	
D. O. VOO. 140.	

Date Invoice Rec'd.  Govt. B/L No.  UNIT PRICE AMOUNT Cost Per
Date Invoíce Rec'd. Govt. B/L No.  UNIT PRICE AMOUN
Date Invoíce Rec'd. Govt. B/L No.  UNIT PRICE AMOUN
Date Invoíce Rec'd. Govt. B/L No.  UNIT PRICE AMOUN
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\$23,506.
THIS SPACE) \$23,506.
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Amount verified; correct for P235
(Signature or initials)
rsuant to authority vested in me, I certify that
s voucher is correct and proper for payment.
(Authorized Certifying Officer) STAT
,,,,,
SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM
nust be shown; other classification optional)

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#### Services Other Than Personal

	Date of	ARTICLES OR SERVICES	077137	UNIT	PRICE	AMOUNT
o. and Date of Order	Date of Delivery or Service	(Enter description, item number of contract or Federal supposedule, and other information deemed necessary)	QUAN- TITY	Cost	Per	
		Direct Labor Materials & Services Travel Expense *Burden Total Direct Costs G & A Total Direct Costs @ 9%  \$10,974.1 1,744.6 2,8,071.6	)3 27			\$21,565.75 1,940.92 \$23,506.67
ctober N	on Premiu	*Burden: m Direct Labor \$10,088.81 @80%-\$8,0	71.05			φ25,700.01
						:

Standard F. Sanitized Copy Approved for Release 2010/06/08 : CIA-RDP65-00523R000100180004-9 1034-107 VICES OTHER THAN PERSONAL BU. VOU. NO.\_\_\_ Use continuation sheet(s) if necessary Contracting Officer (Department, bureau, or establishment) 10 November 1960 Voucher prepared at \_\_\_ Payee's Account No. \_\_\_\_\_ Discount Terms Edgerton, Germeshausen & Crier, Inc. (Address) Contract No.TE-2191 Date 4/26/57 Req. No. Date Invoice Rec'd. Shipped from Weight Govt. B/L No. ARTICLES OR SERVICES UNIT PRICE **AMOUNT** No. and Date of Date of Delivery Enter description, item number of contract or Federal supply Quantity or Service Cost schedule, and other information deemed necessary) October 1960 Fixed Fee \$2,350.67 TOTAL (PAYEE MUST NOT USE THIS SPACE) PAYMENT: DIFFERENCES. COMPLETE PARTIAL FINAL **PROGRESS** Amount verified; correct for\_ ADVANCE (Signature or initials)\_ Pursuant to authority vested in me, I certify man † Approved for \_ this voucher is correct and proper for payment. Title \_ STAT-(Authorized Certifying Officer) \_\_\_=\$1.00 Exchange rate \_\_\_ THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional) Check No. \_\_\_\_\_\_ on Treasurer of the United States Check No. \_\_\_ Paid by (Name of Bank) \* When used in foreign countries, insert name of currency of country in which used. † If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign on the line below "Approved for \$ \_ over his official title.

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	D-4		I	T		i i
o. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	QUAN- TITY	Cost	Per	AMOUNT
		Costs-October 1960 Fixed Fee (10% of above) Fixed Fee Previously Billed Amount this Voucher				\$23,506.67 2,350.67 -0- 2,350.67
	"I certing and that Contract.	y that the Fixed Fee claimed is corrit is proportionate to the progress	made (	nd jus	<b>5</b> ;	
		pller	<del>.</del>			STAT
		v				